## STATE OF NEW HAMPSHIRE

## 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

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PLEASE PRINT

OCT 18 2017

I. Name of Lobbyist(s)	Robert	J. Sculle	4	NEW HAMPSHIRE  DEPARTMENT OF STATE
II. Name of lobbyist's pa	rtnership, firm or	corporation, if any:	•	
Propo	_	assoc of	NE	
(Name of	partnership, firm or			<del></del>
PU. BOX 3898	<u>Co</u>	ncord NH (Town/City)		03300
Business Address: (Street)	•	(Town/City)	(State)	(Zip Code)
(603) <u>224-7337</u> (Telephone)	(603	) 225-936( (Fax)	e-mail Yjscul	leyanhmta.org
III. This statement covers reportable expense transc				y file a separate report for
All reportable transacti	ons occurring in the	e months prior to the rep	oorting date relative to the	e following client:
(Fu	Name of Client as i	t appears on the Lobbyist	Registration Form)	<del></del>
<u>OR</u>		• <b>•••••••••••••••••••••••••••••••••••</b>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
All reportable transaction unrelated to any particular of		including the lobbyist's	family), or the lobbying	firm listed below which are
Reports cover: activity fro	oril 26, 2017 🔲 om date of registration	n 19 <sup>-3</sup> /31/17 activ	July 26, 2017 [] vity from 4/1/17 to 6/30/17	
	tober 25, 2017 (b) ty from 7/1/17 to 9/30	9/17 acti	January 31, 2018 [] vity from 10/1/17 to 12/31/1	17
V. There have been up the state of this box is checked, comp Concord, NH 03301.				
VI Check if additional re	oorts are attached:	:		
If you have received fee	es or made expendit	tures, you must file Add	lendum A-Fees and Exp	penses
If you have paid an hon Expense Reimbursement	orarium or reimbur	sed expenses, you must	file Addendum B- Repo	ort of Honorariums or
☐ If you, your firm, or you	ır family has made	political contributions,	you must file <b>Addendum</b>	a C- Political Contributions
Sworn Statement/Affirma have read RSA 15, RSA 1 and complete to the best of	5-B, RSA 14-C and		wear or affirm that the fo	regoing information is true
(Signature of lobbyint)		<del></del>	(0-17-17 (Date)	<u> </u>
(Signature of lobbying)  ROBERT  (Print Name of lobbyist)	Scourey			

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# STATE OF NEW HAMPSHIRE

## Lobbyists Fees and Expenses Addendum A

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(RSA Chapter 15:6)

OCT 18 2017

1. Name of Lobbyist(s) Robert J. Sculley	NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's partnership, firm or corporation, if any:	
Propane Gas assoc of NF (Name of partnership, firm or corporation)	
(Name of partnership, firm or corporation)  III. Name of Client Propage Gas Assoc of NE Date	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above that are re to lobbying, including fees for services such as public advocacy, government relations, including research, monitoring legislation, and related legal work. The gross fee am reduced by any expenses:	or public relations services ount reported shall not be
a) Total of all fees received in this reporting period  a) \$	5,499,00
b) Total of all fees received this calendar year, prior to this reporting period b) \$ / (This should equal the total of all prior monthly reports for this calendar year)	5,499,00 1,000.00
c) Total of all fees received to date	1 4100 00
(Add lines a and b)	6,499,00
d) Indicate the amount of any such fees that are due, but have not yet been paid  d) \$	\$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to report all experiences. Separate reports are to be filed for expenditures made relative to each client and if the lobbyist(s)/firm that are unrelated to any one client a separate report may be filed Expenses are to be reported in one of three categories of expenses: (a) the aggregate during the reporting period for salaries, benefits, support staff, and office expenses; (b) individual expenses where the expenditure was of \$25.00 or less (for example: meals pullunch where the cost was \$25.00 or less, purchase of a pen with a value of less than \$10 being lobbied, purchase of a ceremonial object given to a person being lobbied with a value (c) an itemized statement of each individual expenditure made during this reporting period any purpose not covered by (a) (for example: purchase of a meal with value of greater ceremonial object to be given to the subject of lobbying with a value greater than \$25, restaurant expenses for a legislative reception). Expenses for honorariums, expense recontributions will be reported on separate addendums and should not be reported on Adden	expenditures are made by d for the lobbyist(s)/firm. total of all expenses paid the aggregate total of all urchased during a business that is given to the person lue of \$25.00 or less); and of greater than \$25.00 for r than \$25, purchase of a but not greater than \$50, cimbursement, or political
<ul> <li>a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.</li> <li>a) \$</li> <li>b) Total aggregate of expenditures during this reporting period, not reported</li> </ul>	\$
in a), of \$25 or less.	<u> </u>
c) Total of all itemized expenditures reported in detail in section VI.	<i>P</i>

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$
f) Total of all expenses year to date	f) \$
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from l period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	
(Signature of lobbyist)	(Date)
ROBERT J. Sculey	
(Print Name of lobbyist)	

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NEW HAMDSFORD DEPARTMENT OF STATE